AMENDMENT TRANSMITTAL LETTER						Docket No. 20759/000G691-US
Application No.		Filing Date Examir			Examiner	
09/447,259-Conf. #3586		_			R. Jeanty	3623
olicant(s): Jam	es D. Marks					
	ACTIVE SYST XPERTS	EM FOR MAN	AGING QUE	STIONS	AND ANS	WERS AMONG USER
	TC	THE COMMI	SSIONER FO	OR PATI	ENTS	
ansmitted here ne fee has beer					cation.	
			S AS AMENI			
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present		Rate	
Total Claims	32	- 32 =	0	х .	50.00	0.00
Independent Claims	6	- 6 =	0	х	200.00	0.00
Multiple Depend	lent Claims (ch	eck if applicabl	e)			
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: x Large Entity Small Entity						0.00
x Large Entity x No additiona	Il fee is require	d for this amer	ndment.		maii Eniity	
	ge Deposit Acc			the am	ount of \$	·
A check in th	ne amount of \$		to cover	the filing	fee is end	closed.
Payment by	credit card. Fo	orm PTO-2038	is attached.			
The Director	is hereby auth below. A dup		_	•		lo. <u>04-0100</u>
	ny overpaymer	ıt.				
x Credit ar				ooc roau	ired under	37 CFR 1.16 and 1.17.
	any additional fili	ng or applicatio	n processing t	ees requ	00 071001	07 01 TC 1. 10 and 1. 17.
X Charge a	Bed	<u> </u>	n processing f	•	ated:	March 20, 2007
x Charge a	Reg. No.: 44,	<u> </u>	n processing t	•		